

HOSPITAL LIAISON NETWORK (HLN)

HISTORY OF THE HOSTITAL ADVISORY COMMITTEE (HAC)

The HAC was formed to advise the OPA staff and Board of Directors on issues and matters related to the provision of physiotherapy services in the public sector, with a particular emphasis on hospital based services.

Intelligence gained from hospital liaisons will help the HAC advise the OPA Board on environmental issues that require the Associations more immediate attention and potential strategic direction. This network allows the HAC to communicate more easily with front line workers who are not necessarily members of the OPA in the hospital setting.

SIX KEY AREAS OF FOCUS

- Workload allocation and coverage
- Leadership, mentorship and role definition
- Preserving outpatient physiotherapy services in hospitals (this may become a broader access issue)
- Salaries and recruitment/retention
- Specialization within the profession
- Scope of practice

EXPECTATIONS OF HOSPITAL LIAISONS

- 1. The liaison would act as a contact person for the HAC at their facility.
- 2. The liaison would ideally be a member of the OPA, however this is not a requirement.
- 3. The liaison would have some knowledge of the <u>administrative</u> environment at their facility.
- 4. The liaison would distribute information on behalf of the HAC.
- 5. The liaison would gather information and identify needs of physiotherapists at their facility on behalf of the HAC.
- 6. The liaison would <u>provide</u> the HAC with feedback on issues concerning physiotherapy services in the hospital /rehab setting.

RESPONSIBITLIES OF THE HAC

The HAC values the support/assistance of the hospital liaisons. The hospital liaisons can expect the following from the HAC:

- The HAC will share its goals and objectives with the hospital liaisons at the start of each year, as well as provide progress reports on each goal throughout the year.
- A two way line of communication will be established between the HAC the HLN.



Monthly updates/questions will be asked of the hospital liaisons, and the HACwill discuss suggestions brought forward by any hospital liaison at the monthly meeting.

• The HAC will share the results of surveys/presentations wherever possible with the HLN via email.